

SCHOOL-BASED REIMBURSEMENT RATES

Procedure Code	Description	Rate
DEVELOPMENTAL THERAPY		
H2000	[Developmental Therapy Evaluation by School] Comprehensive Multidisciplinary Evaluation	\$4.53 per unit
H2014	[Developmental Therapy/Individual, by School] Skills Training and Development, per 15 minutes	\$4.53 per unit
H2014	[Developmental Therapy/Group by School] Skills Training and Development, per 15 minutes Requires modifier HQ	\$1.80 per unit
INTENSIVE BEHAVIORAL INTERVENTION		
H2019	[Intensive Behavioral Intervention – Professional, per 15 minutes] Therapeutic Behavioral Services, per 15 minutes	\$11.35 per unit
H0024	[Intensive Behavioral Intervention Consultation, per 15 minutes] Behavioral health prevention information dissemination service (one-way direct or non-direct contact with service audiences to affect knowledge and attitude)	\$11.35 per unit
H2019	[Intensive Behavioral Intervention – Paraprofessional, per 15 minutes] Therapeutic Behavioral Services, per 15 minutes Requires HM modifier	\$5.10 per unit
SPEECH & HEARING		
92506	[Speech Evaluation by School District] Evaluation of Speech, Language, Voice, Communication, and/or Auditory Processing and/or Aural Rehabilitation Status	\$14.00 per unit
V5008	[Hearing Evaluation by School District] Hearing Screening	\$14.00 per unit
92507	[Individual Speech/Hearing Therapy – Professional; by School] Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); individual Requires HO modifier	\$14.00 per unit
92508	[Group Speech/Hearing Therapy – Professional; by School] Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); two or more individuals Requires HO modifier NOTE: Effective for dates of service on or after 10/20/03, the rate is \$4.37 per unit.	\$4.37 per unit

92507	[Individual Speech/Hearing Therapy – Technician; by School] Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); individual Requires HM modifier	\$8.00 per unit
92508	[Group Speech/Hearing Therapy – Technician; by School] Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); group, two or more individuals	\$1.99 per unit
PHYSICAL THERAPY		
97001	[Physical Therapy Evaluation by School District] Physical Therapy Evaluation	\$14.00 per unit
97110	[Individual Physical Therapy; Professional, by School District] Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility Requires HO modifier	\$14.00 per unit
97150	Group Physical Therapy; Professional, by School District, 2 students] Therapeutic procedure(s), group (2 or more individuals) Requires HO modifier NOTE: Effective for dates of service on or after 10/20/03, the rate is \$3.59 per unit.	\$3.59 per unit
97110	Individual Physical Therapy; Technician, by School District] Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	\$8.00 per unit
97150	Group Physical Therapy; Technician, by School District, 2 students] Therapeutic procedure(s), group (2 or more individuals)	\$1.76 per unit
OCCUPATIONAL THERAPY		
97003	Occupational Therapy Evaluation by School District Occupational Therapy Evaluation	\$14.00 per unit
97530	[Individual Occupational Therapy – Professional; by School District] Requires HO modifier	\$14.00 per unit
97530	[Individual Occupational Therapy – Technician; by School District] Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	\$8.00 per unit

97530	[Group Occupational Therapy – Technician; by School District; 2 students] Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes; 2 or more students. Requires HM and HQ modifier	\$2.10 per unit
EVALUATION SERVICES		
96101	Psychological testing (includes psycho diagnostic, assessment of personality, psychopathology, emotionality, intellectual abilities, e.g., WAIS,, Rorschach, MMPI) per hour of the psychologist's or physician's time, both face-to-face time with the patient and time interpreting test results and preparing the report Specify exact time 1 unit = 1 hour	\$59.32 per hour
96102	Psychological testing (including psycho diagnostic assessment of personality, psychopathology, emotionally, intellectual abilities, e.g., (WAIS, MMPI) with qualified healthcare professional interpretation and report, administered by a technician, per hour of technician time, face-to-face. 1 unit = 1 hour	\$41.70 per hour
96103	Psychological testing (includes psycho diagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g. MMPI), administered by a computer, with qualified healthcare professional interpretation and report. 1 unit = 1 test	\$25.99 per hour
90801	Psychiatric Diagnostic interview examination Physicians should use U1 modifier 1 unit = 15 minutes	\$16.46 per unit
90899	Individual Psychiatric Therapy; by School District Unlisted Psychiatric Service	\$16.74
90853	Group Psychotherapy by School District; (other than of a multiple – family group); 2 or more students	\$3.89 per unit
90847	Family Psychotherapy; by School District; Family psychotherapy (conjoint psychotherapy) (with patient present).	\$12.84 per unit
90887	Collateral Contact; Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons; or advising	\$9.94 per unit

	them how to assist patient Specify exact time 1 unit = 15 minutes Note: This code cannot be used for staffing. Collateral contact cannot be provided by paraprofessionals.	
PSYCHOSOCIAL REHABILITATION (PSR)		
H2017	Individual Psychosocial Rehabilitation; by School District Professional only; Specify exact time 1 unit = 15 minutes	\$11.35 per unit
H2017	Group Psychosocial Rehabilitation; by School District Professional only; two or more individuals Specify exact time 1 unit = 15 minutes	\$2.77 per unit
H0031	Psychosocial Rehabilitation Evaluation by School District Mental Health Assessment, by Non-Physician Specify exact time 1 unit = 15 minutes	\$11.35 per unit
PERSONAL CARE SERVICES		
G9001	[PCS Supervisory RN Assessment by School] Coordinated Care Fee, Initial Rate	\$73.03 per plan
T1001	[Supervising RN Visit by School] Nursing Assessment/Evaluation	\$35.59 per visit
T1002	[Nursing Services by School – RN, Skilled] RN Services, up to 15 minutes Requires TD modifier	\$5.60 per unit
T1003	[Nursing Services by School –LPN, Skilled] LPN/LVN Services, up to 15 minutes	\$4.89 per unit
T1002	[Nursing Services RN Oversight of LPN by School] RN Services, up to 15 minutes	\$5.71 per unit
T1004	[PCS by CNA for School] Services of a Qualified Nursing Aide, up to 15 minutes	\$3.48 per unit
TRANSPORTATION		
A0080	[Transportation by School] Non-Emergency Transportation, per mile – vehicle provided by volunteer (Individual or Organization),	22 cents per mile

	with no vested interest	
T200 1	[Salary for Medically Necessary Attendant to Accompany Client] Non-Emergency Transportation; Patient Attendant/Escort	\$1.91 per unit
DURABLE MEDICAL EQUIPMENT		
E139 9	[Medical Equipment and Supplies, by School] Durable Medical Equipment, Miscellaneous	Price varies on equipme nt
INTERPRETIVE SERVICES		
8296 A	[Interpreter, Non-Certified] Interpretive Services 1 unit = 1 hour	\$12.16 per one hour unit